Approved for use through 7/31/2005, OMB 0551-0032

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* If the entry in column is	is loss than it			ADD'S FEE	·		TOTAL MDV FEE	
* If the entry in column to the Highest Number of the Trighest Number	is less than the entry is Previously Paid For th Previously Paid For th	r column 2, write	O, w colmun 3	_			L	

The Trighest Number Previously Paid For IN THIS SPACE is less than 3, enter "3".

The Trighest Number Previously Paid For [Total or Independent] is the highest number found in the appropriate trou in column 1.

This calection of information in required by 37 CR 1.6. The information is required to outain or retain a benefit by the public which is to file (and by the uncluding gathering, preparing, and submitting the completed application form to the USP10. Time will vary depending upon the individual case. Any comments on the amough of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Oppartment of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Committee for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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